THIS PAGE IS INSERTED BY OIPE SCANNING AND IS NOT PART OF THE OFFICIAL RECORD

Best Available Images

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

BLACK BORDERS

TEXT CUT OFF AT TOP, BOTTOM OR SIDES

FADED TEXT

BLURRY OR ILLEGIBLE TEXT

SKEWED/SLANTED IMAGES

COLORED PHOTOS HAVE BEEN RENDERED INTO BLACK AND WHITE

VERY DARK BLACK AND WHITE PHOTOS

UNDECIPHERABLE GRAY SCALE DOCUMENTS

IMAGES ARE THE BEST AVAILABLE COPY. AS RESCANNING WILL NOT CORRECT IMAGES, PLEASE DO NOT REPORT THE IMAGES TO THE PROBLEM IMAGE BOX.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents Alexandria, Virginia 22313-1450

(703)746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEF and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections of use Pioce 1) 07/18/2003 23850 7590 ARMSTRONG, WESTERMAN & HATTORI, LLP 1725 K STREET, NW Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below. SUITE 1000 WASHINGTON, DC 20006 (Depositor's name) (Signature (Date FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. FILING DATE APPLICATION NO. 09/812,951 03/27/2001 Toshihito Yanashima 010284 5245 TITLE OF INVENTION: SEALED MOTOR COMPRESSOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$300	\$1600	10/20/2003
EXAMINER		ARTUNIT	CLASS-SUBCLASS		
LAM, THANH		2834	310-211000		
. Change of correspondence address or indication of "Fee Address" (37 FR 1.363).			2. For printing on the patent front page, list (1) ARMSTRONG, KRATZ		
☐ Change of correspondence address (or Change of Cerrespondence Address form PTO/SB/122) attached.			c agents OR, alternatively, (2 single firm (having as a men	nber a registered QUIN	ros, HANSON
□ "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	ation (or "Fee Address" Indicate or more recent) attached. Use	ion form of a Customer	attorney or agent) and the na registered patent attorneys or a is listed, no name will be printed	gents. If no name & BR	OOKS, LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PERNTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate ever. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE
Sanyo Electric Co., Ltd.

(B) RESUDENCE: (CITY, and STATE OR COUNTRY)
Moriguchi-shi, Japan

	•						
Please check the appropriate assignee category or categories (will not be printed at the patent)	☐ individual ☐ Morporation or other private group entity ☐ government						
. 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): ★ A chec in the amount of Payment by credit eard. I							
XX Advance Order # of Cories 10 XXThe Commissioner is her	☐ Payment by credit eard. Form PTO-2038 is attached. XXThe Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number012340(enclose an extra copy of this form).						
Commissioner for Patents is requested to apply the Issue Lee and Publication Fee (1, any) or to re-apply any previously paid issue fee to the application identified above.							
other than the applicant; a registered attorney or are, or the assignee or of a daryone	10/20/2003 SDIRETAC 00000084 09812951 01 FC:1301 1330.00 DP 02 FC:1304 300.00 DP 03 FC:8001						